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	PATE	NT	APPLICA Effe	ATION FE ective De	COF	RD		10	18	2	84	12%	~			
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·				(Col	(Column 1) (Colum			_	TYPE			(	OR_			
L	TOTAL CLAIMS								RATE		FEE			RATE		EE
	FOR				BER FILED	יטא	NUMBER EXTRA		BASIC FEE		150 00 OR		DR B	ASIC FE	€ 30	0 00
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"	INDEPENDENT CLAIMS				minus 3 =.	•	3		X100=			OR			2	78
Ľ	MULTIPLE DEPENDENT CLAIM PR									)=			R	360=		
•	* If the difference in column 1 is I				ess than zero, enter *0* in colum				TOTAL			70	L R T	OTAL	18	78
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								1).	SMAL	.L E1	ITITY	<del></del> Of		OTHÉ F MALL		
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		u	Column 1)		" (Column 2	2) (	Column 3)	AD	OIT. FEE	<b>L</b>	<u></u>		ווטטא	. rtt <b>.</b>	···········	7
		R	CLAIMS EMAINING AFTER MENDMENT		HIGHEST NUMBER PREVIOUSL PAID FOR	Y	PRESENT EXTRA		RATE	AD TIOI FE	NAL		RA <sup>*</sup>	TE	ADDI TIONA FEE	L.
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X100=

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ADDIT, FEE

TOTAL

X200≈

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TOTAL ADDIT, FEE

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

AMENUMENT C

Independent i

Minus

<sup>\*</sup> If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

<sup>&</sup>quot;If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20,"

<sup>\*\*\*</sup>If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.